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Bib Data Sheet

<b>SERIAL NUMBER</b> 09/665,574	<b>FILING DATE</b> 09/18/2000 <b>RULE</b> _	<b>CLASS</b> 705	<b>GROUP ART UNIT</b> 2161	<b>ATTORNEY DOCKET NO.</b> 032668-026	
<b>APPLICANTS</b> Daniel I. Flitcroft, Sandycove, IRELAND; Graham O'Donnell, Sandycove, IRELAND;					
<b>** CONTINUING DATA *****</b> THIS APPLICATION IS A DIV OF 09/235,836 01/22/1999 <i>verified</i> WHICH CLAIMS BENEFIT OF 60/099,614 09/09/1998 <i>CRS</i> AND CLAIMS BENEFIT OF 60/098,175 08/26/1998 AND CLAIMS BENEFIT OF 60/092,500 07/13/1998					
<b>** FOREIGN APPLICATIONS *****</b> IRELAND S98 0458 06/15/1998 IRELAND S98 0346 05/07/1998 <i>no copies included</i> IRELAND S98 0223 03/25/1998					
<b>IF REQUIRED, FOREIGN FILING LICENSE</b> <b>GRANTED ** 11/01/2000</b> <b>** SMALL ENTITY **</b>					
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Chad Salomon</i> <i>CRS</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> IRELAND	<b>SHEETS DRAWING</b> 9	<b>TOTAL CLAIMS</b> 20	<b>INDEPENDENT CLAIMS</b> 6
<b>ADDRESS</b>					
21839					
<b>TITLE</b>					
Credit card system and method					
<b>FILING FEE RECEIVED</b> 462	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		